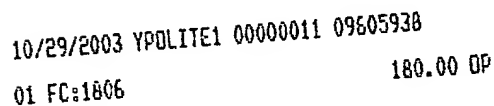


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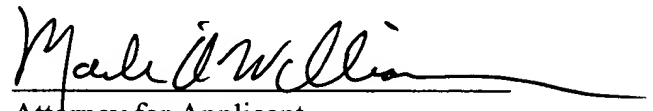


It is respectfully requested that the above information be considered by the Examiner and that a copy of the enclosed Form PTO-1449 be returned indicating that such information has been considered.

Accompanying this Information Disclosure Statement is a check for \$180.00 to cover the fee under 37 CFR 1.17(p). Any deficiency in or overpayment of this fee should be charged or credited to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant

Registration No. 33,628

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200
MAW\mt